LAND USE APPLICATION - INSTRUCTIONS & FORM



APPLICATION FORM

1. Project Information



2. This is an application for (check all that apply)

City of Madison Planning Division Madison Municipal Building, Suite 017 Planning Division Planning Division Madison Municipal Building, Suite 017 Planning Division	Date received Received by Original Submittal Parcel # Aldermanic District			
Zoning Office. Please see the revised submittal instructions on Page 1 of this document.				
This completed form is required for all applications for Plan Commission review except subdivisions or land divisions, which should be filed using the Subdivision Application.	□ UDC □ Common Council	□ PC □ Other		
PPLICATION FORM				
Project Information Address (list all addresses on the project site): 1233 Regent S				
Title:				
This is an application for (check all that apply)				
Zoning Map Amendment (Rezoning) from	Zoning Map Amendment (Rezoning) fromtoto			
Major Amendment to an Approved Planned Devel	Major Amendment to an Approved Planned Development - General Development Plan (PD-GDP)			
Major Amendment to an Approved Planned Devel	Major Amendment to an Approved Planned Development - Specific Implementation Plan (PD-SIP)			
	Review of Alteration to Planned Development (PD) (by Plan Commission)			
Conditional Use or Major Alteration to an Approved Conditional Use				

Major Amendment to an Approved Planned Deve Major Amendment to an Approved Planned Deve Review of Alteration to Planned Development (PD Conditional Use or Major Alteration to an Approve Other requests ____ **Demolition Permit** 3. Applicant, Agent, and Property Owner Information Company Wisconsin Housing Preservation Corporation Mike Slavish Applicant name City/State/Zip Madison, WI 53703 150 E Gilman Street, Suite 1500 Street address Email mslavish@WHPC.com (608) 289-8054 Telephone Company Knothe & Bruce Architects Project contact person Matt Tills City/State/Zip Middleton, WI 53562 8401 Greenway Blvd., Ste 900 Street address _____Email __mtills@knothebruce.com 608-836-3690 Telephone Property owner (if not applicant) City/State/Zip _____ Street address Email Telephone

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APP	LICATION FORM (CONTINUED)		
5. P	roject Description		
Pre	ovide a brief description of the project and all proposed uses of the site:		
5-8	story mixed-use building with ground floor commercial space and apartments. Automobile parking on the	e basement and first floor levels.	
Pro	oposed Square-Footages by Type:		
	Overall (gross): 61,296 sf	Office (net): N/A	
	Overall (gross): 61,296 sf Industrial (net): N/A		
Pro	pposed Dwelling Units by Type (if proposing more than 8 units):		
	Efficiency: 18 1-Bedroom: 2-Bedroom: 12 3-Bedroom: 15 3-Bedroom: 16 3-Bedroom: 17 3-Bedroom: 18 3-Be	oom: 0 4+ Bedroom: 0	
	Density (dwelling units per acre): 147 du/acre Lot Size (in square fee		
Pro	posed On-Site Automobile Parking Stalls by Type (if applicable):		
	Surface Stalls: 0 Under-Building/Structured: 30		
Pro	posed On-Site Bicycle Parking Stalls by Type (if applicable):		
	Indoor: <u></u>		
	eduled Start Date: Spring 2024 Planned Completio	n Date: Summer 2025	
	oplicant Declarations		
Ø	Pre-application meeting with staff . Prior to preparation of this application, the the proposed development and review process with Zoning and Planning Divis	applicant is strongly encouraged to discussion staff. Note staff persons and date.	
	Planning staff Kevin Firchow		
	Zoning staff		
V	Posted notice of the proposed demolition on the <u>City's Demolition Listserv</u> (
	Public subsidy is being requested (indicate in letter of intent) Pre-application notification: The zoning code requires that the applicant notify the district alder and all applicable neighborhood and business associations in writing no later than 30 days prior to FILING this request. Evidence of the pre-application notification or any correspondence granting a waiver is required. List the alderpersonneighborhood association(s), business association(s), AND the dates notices were sent.		
Ø			
	District Alder Tag Evers	Date	
	Neighborhood Association(s) Greenbush		
	Business Association(s)	Date	
he ap	oplicant attests that this form is accurately completed and all required mat	erials are submitted:	
ame (of applicant Mike Slavish Relationship to	property Owner	
uthor	of applicant Mike Slavish Petationship to	Date6 23 23	